EMPLOYMENT/DAY SERVICES
MONTHLY DATA RECORDING SHEET

CONSUMER:_____ SERVICE:_____ MONTH/YEAR:_____

Check Appropriate Unit: AM UNIT: _____ PM UNIT: _____ Start Date: _____ Projected Completion Date: _____

Recording Key:

GOAL:_____

OBJECTIVE:_____

PROGRESS CRITERIA: _____% of the time for _____consecutive months

TEACHING METHOD/ / PROCEDURES:

DAILY DOCUMENTATION	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
1.																															
2.																															
3																															
4																															
Staff Initials																															

(Key to staff initials on page 2)

MONTHLY PROGRESS SUMMARY: Compare percentages from the previous month with percentage of the current month to determine progress.	Previous Month	Current Month	Based on a comparison of the previous and current months' performance:
	Month of:	Month of:	☐ Completion (new objective must be implemented)
			☐ Progress made (continue objective, no action required)
	%	**%**	☐ No progress (review to identify any necessary revisions if no progress made over the 2 month period)

NO PROGRESS: Review is necessary if no progress made over the 2 month period to identify needed revisions.	**Review of No Progress Documentation:**
TIME IN / TIME OUT	Unless documented on the reverse side of this sheet, the consumer was present for the entire unit time as scheduled as part of normal business hours. The normal business unit times for this agency are: _____

Day Director or Designee's Signature:_____ Date: _____

TIME IN / TIME OUT
DOCUMENTATION

Directions: When the consumer leaves the Program for any reason before the end of their unit of service or arrives later than the start of their unit of service, documentation is necessary. Document the date of the occurrence, the time the consumer arrived, the time the consumer left the agency and the time returned if applicable. Document the reason for any absences from the program unit and provide a signature of the staff responsible for this person.

DATE	TIME IN	TIME OUT	TIME RETURNED (*If Applicable*)	REASON FOR LEAVING	STAFF SIGNATURE

KEY TO STAFF INITIALS

INITIAL	STAFF NAME (PRINT FULL NAME)

NOTE: Any additional data collected may be attached to this form as an addendum.

MONTHLY DATA RECORDING SHEET
INSTRUCTIONS

Training and intervention data on goals and objectives must be recorded daily. Documented data must be such that a percentage can be calculated to determine progress from previous month to current month. Specific data recording codes for daily documentation are not mandated. Whichever code used must be explained and clear in order to provide necessary information to evaluate progress. (i.e. plus or minus, etc.). A completed Monthly Data Recording Sheet shall also serve as a monthly progress report of progress as required in the service standards and will be signed by the Day Director or designee when completed.

PAGE 1

Consumer's Name:
- Enter the consumer's first and last name.

Service:
- Enter service being provided. (i.e. Employment, Career Preparation, Community, Day Activity, or Support Center Services.

Month/year:
- Enter the month and year for which documentation is being recorded on the Monthly Data Recording Sheet.

Service Unit
- Check the appropriate unit for the service being provided. If the service being provided takes place during the first unit of the day then check 1st Unit, if the service being provided takes place during the second unit of the day then check 2nd Unit. A separate Monthly Data Recording Sheet must be used for each unit of service. (Unit times are defined at the bottom of the first page of the sheet in Time In / Time Out Section)

Start Date:
- Indicate the date in which data collection begins on this goal/objective.

Projected completion Date:
- Indicate the date in which you <u>anticipate</u> the completion of this goal/objective.

Recording Key:
- **Indicate the symbol being used to record the daily progress of training and or intervention of goals/objectives.**
- Be clear or fully explain what the symbols represent
- Example: if using a plus or minus indicated exactly what a plus represents and what a minus represents. Any symbol may be used that clearly indicates training was accomplished for that day.
- The symbol used must be measurable such that a percentage can be determined for documentation of daily progress.

Goal/Objectives:
- Clearly state the goal and objective on which the consumer is working.
  - Goals and objectives are a result of completion of a service assessment and stated in the consumer's service plan.
  - Be very careful how your goals and objectives are worded. The data collection must reflect accurate information to determine progress of the goal.
  - For example:
  Goal: To increase money management skills by writing a check
  Objective: Carolyn will independently fill in each part of a check
  Progress Criteria: 80% of the time for 2 consecutive months

Training Methods/Procedures:
- The training methods outlined in this section provides clear directions to any staff working with the consumer on how to implement the training objective. Procedures may include the simplification of steps, physical prompts, verbal prompts, gestured prompts or procedure derived from a task analysis.
- Additionally, this methodology must specify any other information that would be important and would affect the training such as hearing loss, visual impairment, limited use of extremities, etc.

Daily Documentation:
- Each day data is collected, record in the box that corresponds with the date training was given, the appropriate mark according to the data recording key to indicate training/intervention was provided and progress can be determined.

- List specific tasks to document progress to determine needed intervention for each step stated in the objective when necessary Example: If using the "checkbook" objective mentioned above, *Carolyn will independently fill in each part of a check,* it would be necessary to list each step of writing a check to be able to identify which part of writing a check needs intervention. If documentation of each step was listed, identification of no progress on a specific step could be identified.
- It is important that goals and objectives are measurable in accordance with the daily documentation.

Percentages:
- Percentages are used to determine if the consumer is or is not making progress. If using pluses or minuses to determine the consumer's progress percentage for the month; add the number of pluses and divide by the total number of pluses and minuses, then multiply by 100, then round off to 0 decimal places.
- Example: If the consumer had 17 pluses and 5 minuses for the month:
  - 17 divided by 22 (total number of pluses and minuses) = .7727
  - Multiply .7727 times 100 = 77.27
  - Round off to 0 decimal places = 77%
- Be sure the symbol being used can be converted to a percentage to measure monthly progress.

Monthly Progress Summary:
- Record the percentage of progress for the previous month and the current month. Enter the name of the month for each record and the percentage for that month.
- Review: Based on the 2 months performance, make a determination of the progress of this objective and check the appropriate box.
  - Completion: The consumer has satisfactory completed this objective and a new objective is needed.
  - Progress made: Progress is being made, continue objective and no action is required.
  - No progress: Progress is not being made according to the percentages and revision of the objective is necessary if no progress is made over the 2 month period. Document the interventions taken in the area provided labeled No Progress.

No Progress:
- If the No Progress box is checked, a review of the interventions is necessary to identify needed revisions to assist the consumer in successfully completing this objective. In the space provided document the explanation of no progress and identify the specific and detailed interventions that will be taken to improve progress on this objective when necessary.

Time in / Time out:
- **Unless documented on the reverse side of the sheet, the consumer is considered present for the entire unit time as scheduled as part of normal business hours. List the normal business unit times for the program (example:1st Unit =9-12am, 2nd Unit =1-3 pm). If the consumer arrives after their unit of service or leaves before the end of their unit of service, documentation is necessary on the back of the Monthly Data Recording Sheet.**

Day Director's Signature:
- The Day Director or designee signs and dates the Monthly Data Sheet to verify that it has been monitored and is correct.

PAGE 2

Time in / Time out:
- Documentation is required if the consumer was not present for the entire unit time as scheduled as part of normal business hours. Normal business unit times are stated on page one of the Monthly Data Recording Sheet.
  - Document the reason for the late arrival or early departure for the unit of service being provided and provide a signature of the staff responsible for the person at those times.

Key to Staff Initials:
All staff initialing the documentation of data on the front of this form must indicate the initial used with the corresponding name for identification of initials.

Note: Any additional data collection may be attached to this form as an addendum.